

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

Attorney Docket No. 10003528-1

As a below named inve	ntor, I hereby	y declare t	hat:					
My residence/post office a I believe I am the original, inventor (if plural names a the invention entitled: VADIAGNOSTIC SYSTE	first and sole re listed below ALIDATION	inventor (if v) of the sul	only o oject r	one name is natter which	listed is cla	below) or an timed and for	n original, first a r which a patent	
the specification of whice [] was filed on Number I hereby state that I have reclaims, as amended by an which is material to patent	eviewed and	_ as Applica nd was ame understood t(s) referred	tion S ended the c to ab	erial on ontents of the ove. I ackno	e abo	or P (if app ove-identified	CT Internationa plicable). specification, in	ncluding the
Foreign Application(s) a I hereby claim foreign prio for patent or inventor(s) ce inventor(s) certificate havi COUNTRY	rity benefits u ertificate listed	nder Title 3 below and before tha	5, Uni have it of th	ted States C also identifie	ed bel	ow any forei which priority	gn application for	or patent or
						YES:	NO:	
<u> </u>						YES:	NO:	
						YES:	NO:	
Provisional Application hereby claim the benefit und isted below:		ited States C			of any		s provisional appl	cation(s)
- y-	NUMBER					_		
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I hereby claim the benefit und insofar as the subject matter manner provided by the first prior application and the national APPLICATION SERIAL N	of each of the operagraph of Ti e 37, Code of Fonal or PCT into	claims of this tle 35, United ederal Regul ernational fili	applic d State ations	ation is not dis s Code Section , Section 1.56 e of this applic	sclose on 112 (a) wh cation:	ed in the prior to the control of th	United States app ge the duty to dis	lication in the close material date of the
POWER OF ATTORNEY: As a named inventor, I he transact all business in the			Office			vith.	rosecute this ap Place Customer Number Bar Code Label here	plication and
Custome	ernumber	02207	9					
Send Correspondence to: HEWLETT-PACKARD COM Intellectual Property Admir P.O. Box 272400 Fort Collins, Colorado 805	ilstration 28-9599			Do	ug W ugla:	s Gilbert (4	8) 985-0642 08) 447-444	7
I hereby declare that all strinformation and belief are that willful false statement: 1001 of Title 18 of the Unitapplication or any patent is	believed to be s and the like ted States Co ssued thereor	e true; and f so made ar de and that n.	urthei e pun such	that these s ishable by fi willful false s	staten ne or staten	nents were m imprisonmer nents may je	nade with the kn nt, or both unde opardize the va	owledge r Section
Full Name f # 1 joint inven Residence/Post Office Add	ress: Hote(ip: Denma glund, Den	mark	
. Ceus Sieum	2			Ņ.	9	August	2000	
Inventor's Signature	<u> </u>			- Date		<i>0</i>		

DECLARATION AND POWER OF ATTIORNEY FOR PATIENT APPLICATION (continued)

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